

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE PLANNING AREA 5**

**QUALITY IMPROVEMENT COMMITTEE
September 10, 2013**

AGENDA

- | | |
|--|------------------|
| I. Welcome and Introductions | Monika/Jessica |
| II. Review of Minutes | All |
| III. Program Announcements | All |
| • SA5 Agency Coordination Trouble Shooter | |
| IV. DMH Updates | Jacquie Wilcoxon |
| V. Quality Assurance | Monika/Jessica |
| • Katie A State Settlement ICC/IHBS Implementation | |
| • DSM 5 Implementation Update | |
| • CMS Renewal of 1915 (b) Waiver | |
| • CMS Comments on Disallowance Rates | |
| • Schedule of Trainings | |
| • Timely Service Change Notification | |
| • NPPES Data Accuracy | |
| VI. Quality Improvement | Monika/Jessica |
| • Consumer Perception Survey Data Collection, 2013 | |
| • EQRO Final Report | |
| • Test Calls Review | |
| • Patients' Rights Office | Jose Reyes |
| ➤ Presentation | Martin Hernandez |
| ➤ Request to Change Provider Report,
4 th Quarter Data, FY 2012-2013 | |
| ➤ Notice of Action (NOA) forms | |

VII. Next QIC Meeting

Monika/Jessica

The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, November 05, 2013 from 9:00AM – 11:00AM, at 11303 West Washington Blvd., Suite 200, Los Angeles, CA 90066.

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SA 5 Quality Improvement Committee
Minutes

Type of Meeting	Quality Improvement Committee	Date	September 10, 2013
Place	DMH SA5 Administration, 11303 West Washington Blvd., Suite 200, Los Angeles, CA 90066	Start Time	9:00 AM
Chairperson	Monika Johnson; Co-Chair Jessica Wilkins	Adjournment	11:00AM
Members Present	Jessica Wilkins, Alcott Center; Sarah Cummings, Alcott Center; Caitlyn O'Hara, Alcott Center; Desiree Odom, Didi Hirsch; Rafael Montoya, Didi Hirsch; Monika Johnson, DMH; Timothy Beyer, DMH; Susan Cozolino, DMH, Alka Bhatt, DMH; Patrice Grant, Edelman – Child; Eloisa Ramos Robles, Exceptional Children's Foundation; Linnea Shapiro Fuchs, Exceptional Children's Foundation; David Kneip, Exodus Recovery; Lipton Ellner, Homes For Life Foundation; Grace Shin, OPCC; Deanna Park, Pacific Asian Counseling Services; Martha Andreani, St. John's CFDC; Brooke Mathews, St. Joseph Center; David Tavlin, Step Up on Second; David Locken, Vista Del Mar; Brenda Pitchford, UCLA Ties for Adoption; Keith Miller, WCIL.		
Excused Members	Kristi Rangel, Alcott Center; Bryan Sawlsville, Didi Hirsch; Amenah Ofumbi, Didi Hirsch; Rosie Garcia, Didi Hirsch; Jacquelyn Wilcoxon, DMH; Thang Nguyen, DMH; Hector Garcia, DMH; Nilsa Gallardo, Edelman - Adult; Bonnie McRae, Edelman – Child; LeeAnn Skorohod, Exodus Recovery; Kathy Shoemaker, Exodus Recovery; Michi Okano, Pacific Asian Counseling Services; Sharon Greene, St. John's CFDC; Barbara Bloom, Step Up on Second; ; Melissa Fernandez, The Help Group; Kim Farnham, The Help Group; Cheryl Carrington, Vista Del Mar; Elaine Rosa, WISE & Healthy Aging. Jennifer Levine, WISE & Healthy Aging.		
Absent Members	Yvette Willock, Pacific Clinics; Libby Hartigan, SHARE!;		
Agenda Item & Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/Due Date
Call to Order & Introductions	The meeting was called to order at 9:00 am	Introductions were made	Monika Johnson QIC Membership

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p>Review of Minutes and Handouts</p> <p>Quality Assurance</p>	<p>Minutes were reviewed and approved for July, 2013.</p> <p>The Trouble Shooter Roster was updated.</p> <ul style="list-style-type: none"> • Follow-up on previous QIC items: <ul style="list-style-type: none"> ○ PEI Practice Learning Networks ○ Clinical Documentation Training for Supervisors <p>Monika reported she had followed up from the last meeting by contacting the QA Division regarding documentation trainings for supervisors. She reported that these trainings are currently not offered but there has been discussion to possibly offer them in the future.</p>	<p>Final approved Minutes for May, 2013 were distributed.</p> <p>Monika reminded providers that she had followed up from the last meeting, by e-mailing information in August, about the location and time for the PEI Practice Learning Network.</p> <p>DMH QA will inform providers if they create such a training.</p>	<p>QIC Membership</p> <p>Monika Johnson</p> <p>DMH QA Division</p>

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Quality Assurance	<ul style="list-style-type: none"> ○ Navigator Contact List <p>Monika reported she followed up from last meeting.</p> <ul style="list-style-type: none"> • QA Bulletin, June 26, 2013, No. 13-04, Intensive Care Coordination (ICC) and Intensive Home Based Services (IHBS) <p>Monika and Jessica informed providers that this Bulletin had been handed out in the last QIC. At this time, the new codes for ICC (T1017HK) and IHBS ((H2015HK) can only be utilized by children's agencies that provide the following programs: Wraparound, Intensive Field Capable Clinical Service (IFCCS) and Treatment Foster Care. Jessica stated that adult providers who serve TAY clients should be aware of the Katie A. criteria and procedures in case these individuals show up at their sites.</p> <p>According to an announcement in the QIC Chairs Meeting, providers need to contact their SA liaison regarding any questions.</p>	<p>Monika had e-mailed the updated SA5 Navigator Contact List to the QIC Members.</p> <p>Copies of the QA Bulletin No. 13-04 were distributed.</p> <p>Providers agreed to email any questions to Monika regarding Katie A. subclass questions.</p>	<p>Providers</p>

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Quality Assurance	<ul style="list-style-type: none"> • DSM 5 Implementation Update CMS indicated that new changes in the DSM 5 will lead to changes in diagnoses and entry to waiver services. DHCS plans to distribute a letter to all counties reflecting any changes. It was further announced that the Department is waiting for a letter from the State regarding ICD codes. It appears that ICD 10 codes may only be available for a brief time since there is discussion of a change to ICD 11 codes. • CMS Renewal of 1915 (b) Waiver Monika and Jessica reported that the 1915 "Freedom of Choice Waiver" has been approved by CMS on July 1, 2013 for 2 years although the State requested 5 years. According to the QA Division, beneficiaries in the Medicaid Program have the freedom to choose their provider but are limited in their choice of providers through a mental health plan. • State DHCS Updates - CMS Comments on Disallowance Rates In the QIC Chairs Meeting it was reported that the disallowance rate for Day Treatment programs was between 38% and 41%. 	<p>See pertinent section in the QA Liaisons' Meeting Minutes from 8/12/13.</p> <p>See pertinent section in the QA Liaisons' Meeting Minutes from 8/12/13.</p> <p>The Final Report will be distributed when it becomes available.</p>	<p>DMH QA Division</p>

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Quality Assurance	<p>Although the QA Division did not yet fully review the Draft Report, it was announced that some of the reasons for disallowances were due to programs not having been certified by the due dates, missing or incomplete progress notes, and scope of practice issues. For the latter, it was reported that two (2) agencies billed for assessments although the post doctoral students were not waived.</p> <p>The QA Division emphasized that unlicensed psychologists and doctorate level psych assistants must apply for a waiver in order to render mental health services.</p> <ul style="list-style-type: none"> • Schedule of Trainings Jessica and Monika reported that the QA division suggested that future training schedules will be provided in a bigger font to make it easier to read. Alka Bhatt from the QA Division announced additional upcoming trainings scheduled for September and October 2013. She also stated that the new schedules will only contain upcoming trainings and not list previous ones. Schedules with past trainings will be kept internally for monitoring purposes. • Timely Service Change Notification Monika and Jessica reminded providers to notify the District Chief regarding program 	<p>The Documentation Training Schedules were distributed</p>	<p>DMH QA Division</p> <p>Providers</p>

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Quality Assurance	<p>changes prior to recertification, and to request a fire clearance at least 10 months before recertification, due to reported fire clearance delays in some areas.</p> <ul style="list-style-type: none"> • NPPES Data Accuracy Agencies claimed that clinicians with clear licenses, are being reported by the IS rendering provider list, as having expired licenses, even though their agency had submitted the updated license information. It was recommended that providers contact CIOB with Rendering Provider concerns. • Initial Intake Log See Policy 202.43. Monika and Jessica highlighted that the Initial Request for MHS Logs need to include not only the date but also the time of the request (4.1.3). The QA Division reported that that the Department will standardize a form for use by directly operated programs and that contract providers will have the option to use the log or create their own log with all the necessary elements that need to be captured. Eventually, the DMH will move from a paper log to a log that will be accessible in the new Integrated Behavioral Health Information System (IBHIS). 	<p>Providers contact CIOB</p>	<p>Providers CIOB</p> <p>Providers</p>

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Quality Improvement	<ul style="list-style-type: none"> Patients' Rights Office (PRO) <ul style="list-style-type: none"> Presentation <p>Martin Hernandez from the Patients' Rights Office conducted a presentation and addressed the following:</p> <ul style="list-style-type: none"> Description of Duties Beneficiary Problem Resolution Process – Grievance & Appeal, DMH Policy & Procedures 202.29; DMH P&P 202.30 – Mutual and Unilateral Termination of MHS; DMH P&P 200.02 – Request to Change Provider State Regulation Oversight re. Patients' Rights Beneficiary Resources (State Mandate) – Guide to Medi-Cal MHS, Provider List, Grievance and Appeal Forms and Procedures Notice of Action – (A) Assessment DMH P&P 202.43 Scheduling Clinical Appointments and Associated Documentation Notice of Action – (E) Lack of Timely Service <p>Jose Reyes from the Patients' Rights Office presented on the various responsibilities and services</p>	<p>A packet of handouts were distributed including Grievance & Appeal Procedures , Grievance & Appeal forms, Request for Change of Provider forms (in English and Spanish), copy of DMH PRO website, copies of NOA forms in English and Spanish.</p> <p>A copy that listed the responsibilities and services was distributed</p>	Providers

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Quality Improvement	<ul style="list-style-type: none"> Patient Rights Office <ul style="list-style-type: none"> Request to Change Provider Report, 4th Quarter Data, FY 2012-2013 <p>Monika and Jessica asked providers to review the report and fax any outstanding reports to Ted Wilson. Monika also asked providers to send an email regarding any inactive programs that are listed on the report.</p> <p>Question by Providers:</p> <ul style="list-style-type: none"> ➤ In our SFC program, clinicians complete triage reports and MHST screenings. Are they required to furnish a NOA if the client does not meet MediCal Necessity? 	<p>A copy of the Request To Change Provider Report was distributed</p> <p>Answer by the PRO Presenter:</p> <p>The NOA form is not required for screening purposes. The NOA-A form only needs to be given to a client when a mental health assessment was conducted.</p>	<p>Providers</p> <p>Providers</p>

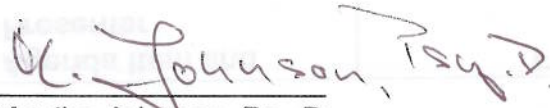
Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Improvement	<ul style="list-style-type: none"> • Test Calls Project, 2013 Tim Beyer stated that he received the SA5 test call logs in that the QI Division is in the process of evaluating them. • CAEQRO Review Monika followed up from last meeting and reported that the EQRO Final report is being reviewed and that Tim Beyer will send the DMH web link once it becomes available. • Consumer Perception Survey Data Collection, 2013 Monika thanked providers for their participation and timely submission of the surveys to the GI Office. 	<p>The results of the Test Calls Project will be distributed once they become available.</p> <p>Monika will send the link to providers as soon as the Final CAEQRO Report becomes available.</p> <p>Monika will submit the surveys to the QI Division.</p>	<p>Tim Beyer Monika Johnson</p> <p>Monika Johnson Tim Beyer</p> <p>Monika</p>

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<p>Quality Improvement</p>	<ul style="list-style-type: none"> • Early Prevention, Surveillance, Detection and Treatment (EPSDT), Performance Improvement Plan (PIP), Monitoring and Tracking Report, August 2013. <p>Monika informed providers that they can access agency specific information by legal entity (LE). Directly operated will find this information on the DMH website and contract providers via the SIFT program.</p>	<p>A copy of the EPSDT report was distributed.</p> <p>Monika will email the link to the website to directly operated providers.</p>	
<p>Policy/Procedures</p>	<ul style="list-style-type: none"> • Policy No. 202.43 Scheduling Clinical Appointments and Associated Documentation (Issue Date 08/15/2013) <p>Jessica and Monika referenced the policy and stated that the policy has been in effect since August 15th, 2013. They pointed out that a request has been made at the QIC Chairs meeting to notify providers directly when new policies were issued. In reviewing the policy, Jessica and Monika highlighted sections of the policy such as the inclusion of new language regarding “newly Active Client” (2.1), that the Initial Intake Logs need to be revised to include not only the date but also the time of the request</p>		<p>Providers</p>

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Cultural Competency	<p>(4.1.3); that appointment times need to be scheduled no more than thirty (30) days from the date of the request for services, and the situations when a NOA-E needs to be issued.</p> <p>Tim Beyer stated that the policy had been developed in response to the CAEQRO review in 2012.</p> <ul style="list-style-type: none"> • Rites of Passage Speaker Presentation - Panel Presentations <p>Jessica and Monika informed members regarding an upcoming Speaker Presentation sponsored by the Cultural Competency Committee highlighting the significance of Rites of Passage among cultural groups. It was announced that Cultural Competency shares an article once per month in the DMH e-News column.</p>	<p>Monika will send the flyer regarding the presentation and the web links to the E-News and the Cultural Competency Committee Minutes.</p>	<p>Monika</p>

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Next Meeting	<p>The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, November 05, 2013 at DMH West LA SA5 Administrative Offices, 11303 W. Washington Blvd., Suite 200 in Los Angeles from 9:00AM – 11:00AM.</p>	N/A	N/A

Respectfully Submitted,


Monika Johnson, Psy.D.


Jessica Wilkins, MFT